## Case 16-82019 Doc 1 Filed 08/24/16 Entered 08/24/16 13:41:36 Desc Main Document Page 1 of 61

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS		
Case number (if known)	Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	■ Chapter 13	Check if this an amended filing

## Official Form 101

## **Voluntary Petition for Individuals Filing for Bankruptcy**

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself					
		About Debtor 1:		About Debtor 2 (Spouse Only in a Joint Case):		
1.	Your full name					
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).	Donald First name  R  Middle name		Latrisha First name  K Middle name		
	Bring your picture identification to your meeting with the trustee.	Hanson, Jr.  Last name and Suffix (Sr., Jr., II, III)		Hanson Last name and Suffix (Sr., Jr., II, III)		
2.	All other names you have used in the last 8 years					
	Include your married or maiden names.					
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-8960		xxx-xx-5891		

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Debtor 1 Donald R Hanson, Jr. Latrisha K Hanson

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):				
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names		I have not used any business name or EINs.  Business name(s)  EINs	■ I have not used any business name or EINs.  Business name(s)  EINs				
5.	Where you live	1606 Iris Ave Rockford, IL 61102	If Debtor 2 lives at a different address:				
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code				
		Winnebago County	County				
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.				
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code				
6.	Why you are choosing this district to file for bankruptcy	Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.)				

<b>Dob</b>	tor 1	Case 16-8		9	Doc 1	Filed 08/24/16 Document	Entered 08 Page 3 of 6	3/24/16 13:41:36 51	Desc Main			
	tor 1 tor 2	Latrisha K Hanson						Case number (if known	)			
70 m	2.	Tall the Court About )	/a 5	) on les	uumtav Caas							
art 7		Tell the Court About \ chapter of the					e Notice Required	hv 11 I I S C & 342/h) fo	r Individuals Filing for Bankruntov			
•	Bank	kruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.									
	cnoc	osing to file under		☐ Chapter 7								
			☐ Chapter 11									
				hapte	er 12							
			■ C	hapte	er 13							
3.	How	you will pay the fee							e in your local court for more details			
				orde		orney is submitting your			vith cash, cashier's check, or money pay with a credit card or check with			
						ne fee in installments. I In Installments (Official F		option, sign and attach the	e Application for Individuals to Pay			
				but app	is not requir lies to your f	ed to, waive your fee, and family size and you are u	d may do so only inable to pay the fe	f your income is less than	for Chapter 7. By law, a judge may, a 150% of the official poverty line that choose this option, you must fill out le it with your petition.			
9.	bank	e you filed for cruptcy within the 8 years?	■ No									
		,	,		District		When	Case n	umber			
					District _		When	Case n				
					District _		When	Case n	umber			
10.		any bankruptcy	■ No	Ω								
		s pending or being by a spouse who is	□ Ye	-								
	not f you,	iling this case with or by a business ner, or by an										
					Debtor _			Relation	ship to you			
					District _		When		mber, if known			
					Debtor _				ship to you			
					District		When	Case nu	mber, if known			

## 11. Do you rent your residence?

No.

Go to line 12.

☐ Yes.

Has your landlord obtained an eviction judgment against you and do you want to stay in your residence?

☐ No. Go to line 12.

Yes. Fill out *Initial Statement About an Eviction Judgment Against You* (Form 101A) and file it with this bankruptcy petition.

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Debtor 1 Donald R Hanson, Jr.

Deb	otor 2 Latrisha K Hanso	n			Case number (if known)
Par	Report About Any Bu	ısinesses	You Owi	n as a Sole Proprie	tor
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.	
		☐ Yes.	Name	e and location of bus	siness
	A sole proprietorship is a		Name	f hi if	
	business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.			e of business, if any	
	If you have more than one sole proprietorship, use a separate sheet and attach		Numl	oer, Street, City, Sta	te & ZIP Code
	it to this petition.		Chec	k the appropriate bo	ox to describe your business:
				Health Care Busin	ness (as defined in 11 U.S.C. § 101(27A))
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))
				Stockbroker (as d	efined in 11 U.S.C. § 101(53A))
				Commodity Broke	er (as defined in 11 U.S.C. § 101(6))
				None of the above	e
Chapter 11 of the Bankruptcy Code and are you a small business in 11 U.S.C. 1116(1)(B).			s. If you in ns, cash-f	court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of ederal income tax return or if any of these documents do not exist, follow the procedure	
	debtor?  For a definition of small	■ No.	I am	not filing under Chap	oter 11.
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am t Code		11, but I am NOT a small business debtor according to the definition in the Bankruptcy
		☐ Yes.	I am	iling under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.
Par	t 4: Report if You Own or	Have Any	/ Hazardo	ous Property or An	y Property That Needs Immediate Attention
14.	Do you own or have any	■ No.			
	property that poses or is alleged to pose a threat	☐ Yes.			
	of imminent and identifiable hazard to	□ res.	What is	the hazard?	
	public health or safety?				
	Or do you own any property that needs immediate attention?			diate attention is why is it needed?	
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where i	s the property?	Number, Street, City, State & Zip Code
					Tumbor, Street, Oity, State & Zip Sout

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Debtor 1 Donald R Hanson, Jr.
Debtor 2 Latrisha K Hanson

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

#### Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

□ I am not required to receive a briefing about credit counseling because of:

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. Case 16-82019 Doc 1 Filed 08/24/16 Entered 08/24/16 13:41:36 Desc Main Document Page 6 of 61

	tor 2 Latrisha K Hanson				Case number (if k	known)			
Part	6: Answer These Quest	ions for R	eporting Purposes						
16.	What kind of debts do you have?	16a.	Are your debts primarily consindividual primarily for a person			in 11 U.S.C. § 101(8) as "incurred by an			
			☐ No. Go to line 16b.						
			■ Yes. Go to line 17.						
		16b.	Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.						
			☐ No. Go to line 16c.						
			☐ Yes. Go to line 17.						
		16c.	State the type of debts you owe	that are not consumer deb	ots or business de	ebts			
17.	Are you filing under Chapter 7?	■ No.	I am not filing under Chapter 7.	Go to line 18.					
	Do you estimate that after any exempt property is excluded and	☐ Yes.	I am filing under Chapter 7. Do are paid that funds will be available.			is excluded and administrative expenses			
	administrative expenses		□ No						
	are paid that funds will be available for distribution to unsecured creditors?		☐ Yes						
18.	How many Creditors do you estimate that you	<b>1</b> -49		□ 1,000-5,000 □ 5001-10,000		□ 25,001-50,000 □ 50,001-100,000			
	owe?			☐ 10,001-25,000 ☐ More than100,000					
19.	How much do you estimate your assets to be worth?	□ \$0 - \$	50,000 01 - \$100,000	□ \$1,000,001 - \$10 m □ \$10,000,001 - \$50		□ \$500,000,001 - \$1 billion □ \$1,000,000,001 - \$10 billion			
		<b>1</b> \$100,	001 - \$100,000 001 - \$500,000 001 - \$1 million	□ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million		☐ \$1,000,000,001 - \$10 billion ☐ More than \$50 billion			
20.	How much do you estimate your liabilities	□ \$0 - \$	.50,000 001 - \$100,000	□ \$1,000,001 - \$10 m □ \$10.000.001 - \$50		\$500,000,001 - \$1 billion \$1,000,000,001 - \$10 billion			
	to be?	_ ` `	001 - \$100,000	□ \$50,000,001 - \$100		☐ \$1,000,000,001 - \$10 billion			
			001 - \$1 million	□ \$100,000,001 - \$50	☐ More than \$50 billion				
Part	7: Sign Below								
For	you	I have ex	camined this petition, and I declar	e under penalty of perjury	that the information	on provided is true and correct.			
			chosen to file under Chapter 7, I tates Code. I understand the relie			der Chapter 7, 11,12, or 13 of title 11, e to proceed under Chapter 7.			
			no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this ocument, I have obtained and read the notice required by 11 U.S.C. § 342(b).						
		I request	relief in accordance with the cha	pter of title 11, United State	es Code, specifie	d in this petition.			
			cy case can result in fines up to S			operty by fraud in connection with a s, or both. 18 U.S.C. §§ 152, 1341, 1519,			
		/s/ Don	ald R Hanson, Jr.		atrisha K Hans	on			
			R Hanson, Jr. e of Debtor 1		sha K Hanson ture of Debtor 2				
		Executed	d on August 24, 2016 MM / DD / YYYY	Execu		st 24, 2016 D / YYYY			

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Debtor 1 Donald R Hanson, Jr.
Debtor 2 Latrisha K Hanson

Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Philip H Signature of	H. Hart  Attorney for Debtor	Date	August 24, 2016 MM / DD / YYYY
Philip H. F	lart		
	Law Firm P.C.		
	h Mulford Rd.		
Suite C Rockford,	IL 61114 City, State & ZIP Code		
Contact phone	815-315-0683	Email address	rockford@jordanpratt.com
3121821 Bar number & S	tate		_

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		Docum	ent Page 8 of 61	
Fill in this infor	mation to identify your	case:		
Debtor 1	Donald R Hansor	ı, Jr.		
	First Name	Middle Name	Last Name	
Debtor 2	Latrisha K Hanso	n		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				☐ Check if this is an amended filing

## Official Form 106Sum

## **Summary of Your Assets and Liabilities and Certain Statistical Information**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

		Your a	esets
			of what you own
1.	Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$	99,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	14,820.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	113,820.00
Ра	rt 2: Summarize Your Liabilities		
			iabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	108,500.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	5,000.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	11,733.00
	Your total liabilities	\$	125,233.00
Pa	rt 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	3,494.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	3,144.00
Pa	rt 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other sc	hedules.
7.	■ Yes What kind of debt do you have?		

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

the court with your other schedules.

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Debtor 1 Donald R Hanson, Jr.
Debtor 2 Latrisha K Hanson Case

Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

3,814.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total cl	aim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	5,000.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	5,000.00

	Ca	se 16-82019	9 Doc 1		08/24/16 ument	Entered 08/24/1 Page 10 of 61	L6 13:41:36	Des	c Main	
Fill	in this inforn	nation to identify	your case and th							
Deb	tor 1	Donald R Ha	nson, Jr.							
D - I	10	First Name		e Name		Last Name				
	tor 2 use, if filing)	Latrisha K H		e Name		Last Name				
Unit	ed States Bai	nkruptcy Court for	the: NORTHER	N DIST	RICT OF ILLIN	NOIS				
_		, ,						-	<b>.</b>	
Cas	e number _					-			J Check if this is an amended filing	
SC n eachink	chedule ch category, so it fits best. Be	e as complete and a e space is needed, a	roperty escribe items. List accurate as possible	le. If two	married people	in asset fits in more than one e are filing together, both are e top of any additional pages	equally responsible	e for supp	olying correct	
Part	1: Describe	Each Residence. Bu	uilding. Land. or Ot	her Real	Estate You Ow	n or Have an Interest In				
						land, or similar property?				
			untable interest in a	iny resid	cnice, building,	iana, or similar property:				
_	No. Go to Part Yes. Where is	· <del>- ·</del>								
		,								
1.1	1606 Iris A	ve		wnat	Single-family h	? Check all that apply	Do not doduct coo	urad alain	as ar avametions. Dut	
	Street address, i	f available, or other des	cription	- - -	Duplex or mult		the amount of any	leduct secured claims or exemptions. Put unt of any secured claims on Schedule D: s Who Have Claims Secured by Property.		
	Rockford	<b>IL</b> State	61102-0000 ZIP Code		Manufactured Land Investment pro	or mobile home	Current value of entire property?		Current value of the portion you own? \$99,000.00	
	City	State	ZIF Code		Timeshare	operty			·	
				□ Who		in the property? Check one		ole, tenan	ir ownership interest cy by the entireties, or	
	Winnebag	0			Debtor 2 only					
	County			_	Debtor 1 and [	Debtor 2 only	☐ Check if this	is comm	unity property	
						the debtors and another bu wish to add about this ite on number:	(see instructions m, such as local	3)		
			ortion you own fo			rom Part 1, including any	/ entries for		\$99,000.00	

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

pages you have attached for Part 1. Write that number here......

Official Form 106A/B Schedule A/B: Property page 1

Part 2: Describe Your Vehicles

Case 16-82019 Doc 1 Filed 08/24/16 Entered 08/24/16 13:41:36 Desc Main Document Page 11 of 61 Debtor 1 Donald R Hanson, Jr. Debtor 2 Latrisha K Hanson Case number (if known) 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles ☐ No Yes Do not deduct secured claims or exemptions. Put Lincoln 3 1 Make: Who has an interest in the property? Check one the amount of any secured claims on Schedule D: MKS Debtor 1 only Model: Creditors Who Have Claims Secured by Property. 2009 Year: Debtor 2 only Current value of the Current value of the 110000 Approximate mileage: Debtor 1 and Debtor 2 only entire property? portion you own? Other information: At least one of the debtors and another per NADA \$9,500.00 \$9,500.00 ☐ Check if this is community property (see instructions) Do not deduct secured claims or exemptions. Put Chevy 3.2 Make: Who has an interest in the property? Check one the amount of any secured claims on Schedule D: **Impala** Debtor 1 only Model Creditors Who Have Claims Secured by Property. 2004 Year: Debtor 2 only Current value of the Current value of the 100000 Approximate mileage: Debtor 1 and Debtor 2 only entire property? portion you own? Other information: ☐ At least one of the debtors and another \$3,000.00 \$3,000.00 ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No ☐ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$12,500.00 pages you have attached for Part 2. Write that number here.......>> Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware

□ No

Yes. Describe.....

older household furniture & personal belongings

\$1,500.00

7. Electronics

Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

□ No

Yes. Describe.....

tvs, laptop, cell phones

\$300.00

8. Collectibles of value

Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles

■ No

	Case 10-82019 DC	Document		41.30 Desc Main
Debtor 1 Debtor 2	Donald R Hanson, Jr. Latrisha K Hanson	Document	Case number	(if known)
☐ Yes	. Describe			
Examp	nent for sports and hobbies bles: Sports, photographic, exercis musical instruments  Describe	e, and other hobby equipm	ent; bicycles, pool tables, golf clubs, ski	s; canoes and kayaks; carpentry tools;
■ No	ms  pples: Pistols, rifles, shotguns, amr  Describe	nunition, and related equip	ment	
□ No	es  ples: Everyday clothes, furs, leath  Describe	ıer coats, designer wear, sl	noes, accessories	
	necessary v	wearing apparel		\$200.00
□ No		ewelry, engagement rings,	wedding rings, heirloom jewelry, watche	es, gems, gold, silver
	wedding rin	igs & misc. costume je	welry	\$200.00
Exam  No □ Yes  14. Any o ■ No	arm animals apples: Dogs, cats, birds, horses  Describe  ther personal and household ite  Give specific information	∍ms you did not already l	ist, including any health aids you did	not list
	the dollar value of all of your er Part 3. Write that number here		ng any entries for pages you have att	\$2,200.00
Part 4: D	escribe Your Financial Assets			
Do you o	wn or have any legal or equitab	le interest in any of the fo	ollowing?	Current value of the portion you own? Do not deduct secured claims or exemptions.
■ No	oples: Money you have in your wal	•	deposit box, and on hand when you file	your petition
	sits of money oples: Checking, savings, or other institutions. If you have mult		ntes of deposit; shares in credit unions, be institution, list each.	rokerage houses, and other similar
		Institut	ion name:	
	17.1. <b>che</b> c	cking PNC	Bank	\$100.00

Official Form 106A/B Schedule A/B: Property page 3

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Debtor 1	Donald R Hanson, Jr.	Document	Page 13 01 01	
Debtor 2	Latrisha K Hanson		Case number (if kn	iown)

		17.2.	savings		PNC Bank	\$20.00
18.	Bonds, mutual funds, or Examples: Bond funds, ir ■ No				ge firms, money market accounts	
	☐ Yes		Institution or issu	uer name	x:	
19.	joint venture	ck and	interests in inco	orporate	d and unincorporated businesses, including an interest in	an LLC, partnership, and
	■ No □ Yes. Give specific infor		about them me of entity:		% of ownership:	
20	Negotiable instruments in Non-negotiable instrume.  ■ No	nclude p nts are	personal checks, those you canno	cashiers	e and non-negotiable instruments ' checks, promissory notes, and money orders. ' to someone by signing or delivering them.	
	☐ Yes. Give specific inform		about them uer name:			
21.	□ No	A, ERI	SA, Keogh, 401(k	k), 403(b)	, thrift savings accounts, or other pension or profit-sharing plan	ns
	Yes. List each account	•	tely. of account:		Institution name:	
		pens	ion		UAW Union 1268	\$0.00
	Examples: Agreements w  No				you may continue service or use from a company cutilities (electric, gas, water), telecommunications companies	, or others
	■ No □ Yes				Institution name or individual:	
23.	Annuities (A contract for	a perio	dic payment of m	oney to	you, either for life or for a number of years)	
	■ No □ Yes Issu	ier nam	e and description	٦.		
24	26 U.S.C. §§ 530(b)(1), 52	<b>IRA, i</b> 9A(b),	n an account in and 529(b)(1).	a qualifi	ed ABLE program, or under a qualified state tuition progra	am.
	■ No □ Yes Inst	itution i	name and descrip	otion. Sep	parately file the records of any interests.11 U.S.C. § 521(c):	
25.	Trusts, equitable or futu ■ No □ Yes. Give specific infor			y (other	than anything listed in line 1), and rights or powers exerci	sable for your benefit
26.	Patents, copyrights, trac			, and otl	ner intellectual property	
	■ No			ceeds fro	om royalties and licensing agreements	
	☐ Yes. Give specific infor	mation	about them			
27.	Licenses, franchises, an Examples: Building perm ■ No				ve association holdings, liquor licenses, professional licenses	
	☐ Yes. Give specific infor	mation	about them			
M	oney or property owed to	you?				Current value of the portion you own?

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5 14554			Document	Page 14 of 61	DC3C Main
Debtor 1 Debtor 2	Donald R Hanson, Latrisha K Hanson			Case number (if known)	
					claims or exemptions.
■ No	funds owed to you  Give specific information	n about them, inເ	cluding whether you alre	eady filed the returns and the tax years	
■ No			usal support, child supp	ort, maintenance, divorce settlement, property	r settlement
Examp ■ No	amounts someone owe oles: Unpaid wages, disa benefits; unpaid loa Give specific information	ability insurance pans you made to		nefits, sick pay, vacation pay, workers' compe	nsation, Social Security
<i>Examp</i> □ No	Name the insurance con	r life insurance; h		(HSA); credit, homeowner's, or renter's insura	nce
	Co	company name:		Beneficiary:	Surrender or refund value:
		mployer provi ash value	ided term life policy	- no wife	\$0.00
If you a someo	terest in property that is are the beneficiary of a list one has died.  Give specific information	iving trust, expec		ed nsurance policy, or are currently entitled to rec	eive property because
Examp ■ No	s against third parties, voles: Accidents, employm	ment disputes, in		iit or made a demand for payment s to sue	
34. Other o	contingent and unliquid	dated claims of	every nature, includin	ng counterclaims of the debtor and rights to	set off claims
	Describe each claim				
35. <b>Any fin</b> No	nancial assets you did r	not already list			
	Give specific information	n			
				ny entries for pages you have attached	\$120.00

Official Form 106A/B Schedule A/B: Property page 5

Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.

37. Do you own or have any legal or equitable interest in any business-related property?

■ No. Go to Part 6.□ Yes. Go to line 38.

Case 16-82019 Doc 1 Filed 08/24/16 Entered 08/24/16 13:41:36 Desc Main Page 15 of 61 Document Donald R Hanson, Jr. Debtor 1 Debtor 2 Case number (if known) Latrisha K Hanson Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here ..... \$0.00 Part 8: List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 \$99,000.00 Part 2: Total vehicles, line 5 \$12,500.00 Part 3: Total personal and household items, line 15 57. \$2,200.00 Part 4: Total financial assets, line 36 \$120.00 59. Part 5: Total business-related property, line 45 \$0.00 Part 6: Total farm- and fishing-related property, line 52 60. \$0.00 Part 7: Total other property not listed, line 54 \$0.00

\$14,820.00

Copy personal property total

Official Form 106A/B Schedule A/B: Property page 6

Total personal property. Add lines 56 through 61...

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$14,820.00

\$113,820.00

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		12(1)	311 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
Fill in this infor	mation to identify your	case:		
Debtor 1	Donald R Hansor	n, Jr.		
	First Name	Middle Name	Last Name	
Debtor 2	Latrisha K Hanso	n		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

## Official Form 106C

## Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

<ol> <li>Which set of exemptions are you claiming? Check one only, even if your spo</li> </ol>	pouse is tilir	ig with you
--	----------------	-------------

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

•			
Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
Copy the value from Schedule A/B	Chec	ck only one box for each exemption.	
\$3,000.00		\$3,000.00	735 ILCS 5/12-1001(c)
		100% of fair market value, up to any applicable statutory limit	
\$1,500.00		\$1,500.00	735 ILCS 5/12-1001(b)
		100% of fair market value, up to any applicable statutory limit	
\$300.00		\$300.00	735 ILCS 5/12-1001(b)
		100% of fair market value, up to any applicable statutory limit	
\$200.00		\$200.00	735 ILCS 5/12-1001(a)
		100% of fair market value, up to any applicable statutory limit	
\$200.00		\$200.00	735 ILCS 5/12-1001(b)
\$200.00	-		
	\$3,000.00 \$1,500.00 \$200.00	\$3,000.00	Schedule A/B  \$3,000.00  \$3,000.00  \$1,500.00  \$1,500.00  \$1,00% of fair market value, up to any applicable statutory limit  \$300.00  \$300.00  \$1,00% of fair market value, up to any applicable statutory limit  \$300.00  \$300.00  \$1,00% of fair market value, up to any applicable statutory limit  \$300.00  \$100% of fair market value, up to any applicable statutory limit  \$200.00  \$200.00  \$100% of fair market value, up to any applicable statutory limit

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Latrisha K Hanson Case number (if known) Debtor 2 Brief description of the property and line on Current value of the Specific laws that allow exemption Amount of the exemption you claim Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B checking: PNC Bank 735 ILCS 5/12-1001(b) \$100.00 \$100.00 Line from Schedule A/B: 17.1 100% of fair market value, up to any applicable statutory limit savings: PNC Bank 735 ILCS 5/12-1001(b) \$20.00 \$20.00 Line from Schedule A/B: 17.2 100% of fair market value, up to any applicable statutory limit pension: UAW Union 1268 735 ILCS 5/12-1006 \$0.00 100% Line from Schedule A/B: 21.1 100% of fair market value, up to any applicable statutory limit 3. Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? No Yes

Debtor 1

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		Document Pag	e 18 of 61		
Fill in this inform	ation to identify yoυ	ır case:			
Debtor 1	Donald R Hanso	on. Jr.			
	First Name	Middle Name Last Na	me	_	
Debtor 2	Latrisha K Hans	son			
(Spouse if, filing)	First Name	Middle Name Last Na	me		
United States Ban	kruptcy Court for the:	: NORTHERN DISTRICT OF ILLINOIS			
Case number				□ Chook	if this is an
(ii kilowii)				_	led filing
					.oug
Official Form	106D				
Schedule	D: Creditors	Who Have Claims Secu	red by Prope	rtv	12/15
		If two married people are filing together, both out, number the entries, and attach it to this fo			
1. Do any creditors I	have claims secured by	y your property?			
☐ No. Check	this box and submit t	his form to the court with your other schedul	les. You have nothing els	e to report on this form.	
Yes Fill in	all of the information	helow	-		
	Secured Claims	zolow.			
			Column A	Column B	Column C
		more than one secured claim, list the creditor sepa s a particular claim, list the other creditors in Part 2		Value of collateral	Unsecured
much as possible, lis	st the claims in alphabeti	cal order according to the creditor's name.	Do not deduct the value of collateral		portion If any
2.1 Ally Finan	cial	Describe the property that secures the claim			\$0.00
Creditor's Name		2009 Lincoln MKS 110000 miles			
		per NADA			
000 B !-	04	As of the date you file, the claim is: Check all t	l hat		
200 Renais Detroit, MI		apply.			
	City, State & Zip Code	☐ Contingent			
Number, Street,	City, State & Zip Code	☐ Unliquidated☐ Disputed			
Who owes the del	ot? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only		■ An agreement you made (such as mortgage	or secured		
Debtor 2 only		car loan)			
■ Debtor 1 and Del	otor 2 only	☐ Statutory lien (such as tax lien, mechanic's li	ien)		
☐ At least one of th	e debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this cla		Other (including a right to offset)			
community dek	ot				
	Opened				
	07/12 Last				
Date debt was incu	Active rred 5/13/16	Last 4 digits of account number 1	309		
Date debt was incu	3/13/10	Last 4 digits of account number			
Wells Farg	o Home				
2.2   Mortgage	jo Home	Describe the property that secures the claim	s \$99,000.00	\$99,000.00	\$0.00
Creditor's Name		1606 Iris Ave Rockford, IL 61102			
		Winnebago County			
Day 5000		As of the date you file, the claim is: Check all t	hat		
Box 5296	am, IL 60197	apply.			
	City, State & Zip Code	☐ Contingent☐ Unliquidated			
Number, Street,	ony, state a zip code	☐ Unliquidated ☐ Disputed			
Who owes the del	ot? Check one.	Nature of lien. Check all that apply.			
■ Debtor 1 only		■ An agreement you made (such as mortgage	or secured		
Debtor 2 only		car loan)	1. 1000.00		

Official Form 106D

☐ Debtor 1 and Debtor 2 only

 $\hfill \square$  At least one of the debtors and another

 $\square$  Statutory lien (such as tax lien, mechanic's lien)

☐ Judgment lien from a lawsuit

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Debtor 1	<b>Donald R Hansor</b>	Hanson, Jr.		Ca	se number (if know)	
	First Name	Middle Name	Last Name		<del>-</del>	
Debtor 2	Latrisha K Hanso	n				
	First Name	Middle Name	Last Name			
	if this claim relates to a unity debt	Other (in	ncluding a right to offset)			
Date debt	was incurred	Last	4 digits of account number	1409		
Add the	dollar value of your ent	ries in Column A on	this page. Write that number h	ere:	\$108,500.00	л
If this is the last page of your form, add the dollar value totals from all pages. Write that number here:			lue totals from all pages.		\$108,500.00	•

## Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

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			Document	t Page 20 o	of 61		
Fill in	this informatio	n to identify your	case:				
Debtor	r 1 <b>D</b>	onald R Hanson	. Jr.				
		rst Name	Middle Name	Last Name			
Debtor		atrisha K Hanso					
(Spouse	if, filing) Fi	rst Name	Middle Name	Last Name			
United	l States Bankrup	otcy Court for the:	NORTHERN DISTRICT O	F ILLINOIS			
Casa r	number						
(if known						☐ Check	if this is an
						amend	led filing
~ · · ·		00E/E					
	ial Form 10						40/45
			ho Have Unsecure Part 1 for creditors with PRIO				12/15
Schedu Schedu left. Atta name ar	le G: Executory ( le D: Creditors W ach the Continua nd case number	Contracts and Unexp /ho Have Claims Sec tion Page to this pag (if known).	that could result in a claim. A ired Leases (Official Form 106 ured by Property. If more spac e. If you have no information t	G). Do not include any e is needed, copy the F	creditors with partially s Part you need, fill it out, i	ecured claims that a number the entries in	re listed in nthe boxes on the
Part 1		Your PRIORITY Ur					
	•	ive priority unsecure	d claims against you?				
	No. Go to Part 2.						
	Yes.		s. If a creditor has more than one				
pos Pai	ssible, list the clair rt 1. If more than c	ns in alphabetical orde one creditor holds a pa	is both priority and nonpriority and er according to the creditor's namericular claim, list the other credit see the instructions for this form in	ne. If you have more than tors in Part 3.	n two priority unsecured cla		
2.1	IRS		Last 4 digits of ac	count number	\$5,000.00	\$5,000.00	\$0.00
	Priority Creditor					· · · · · · · · · · · · · · · · · · ·	•
		venue Service OH 45999-0149	When was the de	bt incurred?		-	
		City State Zlp Code	As of the date you	u file, the claim is: Che	ck all that apply		
W	Vho incurred the	debt? Check one.	☐ Contingent				
	Debtor 1 only		☐ Unliquidated				
	Debtor 2 only		☐ Disputed				
	■ Debtor 1 and De	ebtor 2 only	·	unsecured claim:			
	At least one of t	he debtors and anothe	n Domestic supp	ort obligations			
_	_	aim is for a commu	<u></u>	ain other debts you owe	the government		
	the claim subject		-	h or personal injury while	•		
	■ No		☐ Other. Specify	, , ,	•		
	☐ Yes		— Outlot: Opcomy	back taxes			
D1-0	1 !- ( A !! - C )	VNONDDIODIT	V II				
Part 2			Y Unsecured Claims				
_			cured claims against you?				
	No. You have not	thing to report in this p	art. Submit this form to the court	with your other schedule	9S.		
	Yes.						
uns	secured claim, list	the creditor separately	aims in the alphabetical order of or each claim. For each claim I st the other creditors in Part 3.If	listed, identify what type	of claim it is. Do not list cla	aims already included	in Part 1. If more

Total claim

Part 2.

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Debtor 1 Donald R Hanson, Jr.

Debt	or 2 Latrisha K Hanson		Case number (if know)					
4.1	Afni, Inc.  Nonpriority Creditor's Name	Last 4 digits of account number	3510	\$553.00				
	Po Box 3097 Bloomington, IL 61702	When was the debt incurred?	Opened 06/16					
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim						
	■ Debtor 1 only	☐ Contingent						
	Debtor 2 only	☐ Unliquidated						
	Debtor 1 and Debtor 2 only	☐ Disputed						
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:					
	☐ Check if this claim is for a community	☐ Student loans						
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not					
	■ No	☐ Debts to pension or profit-sharing	g plans, and other similar debts					
	Yes	Other. Specify Collection	Attorney Comcast					
4.2	Americollect Nonpriority Creditor's Name	Last 4 digits of account number	\$0.00					
	Box 1566 Manitowoc, WI 54221	When was the debt incurred?	When was the debt incurred?					
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim						
	Debtor 1 only	☐ Contingent						
	Debtor 2 only	☐ Unliquidated						
	■ Debtor 1 and Debtor 2 only	☐ Disputed						
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure						
	☐ Check if this claim is for a community	☐ Student loans						
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not					
	No	Debts to pension or profit-sharing						
	Yes	Other. Specify collection i	notice only					
4.3	Ashro	Last 4 digits of account number	1220	\$312.00				
	Nonpriority Creditor's Name		Opened 04/13 Last Active					
	3650 Milwaukee St Madison, WI 53714	When was the debt incurred?	6/15/14					
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim						
	Debtor 1 only	☐ Contingent ☐ Unliquidated						
	Debtor 2 only							
	☐ Debtor 1 and Debtor 2 only	☐ Disputed						
	lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecure						
	Check if this claim is for a community	☐ Student loans						
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not					
	No		t-sharing plans, and other similar debts					
	Yes	Other. Specify Charge Account						

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Debtor 1 Donald R Hanson, Jr.

Debtor 2 Latrisha K Hanson				
4.4	Atg Credit	Last 4 digits of account number	7929	\$19.00
	Nonpriority Creditor's Name 1700 W Cortland St Ste 2 Chicago, IL 60622	When was the debt incurred?	Opened 04/16	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	□ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	I claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	■ Other. Specify Collection A Of Rockf	Attorney Radiology Consultants	
4.5	Cash Store Nonpriority Creditor's Name	Last 4 digits of account number		\$1,100.00
	6501 N. Second St Loves Park, IL 61111	When was the debt incurred?		
	Number Street City State Zlp Code	As of the date you file, the claim is	s: Check all that apply	
	Who incurred the debt? Check one.			
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	I claim:	
	Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify loan		
4.6	Codilis & Associates	Last 4 digits of account number		\$0.00
	Nonpriority Creditor's Name 15W030 North Frontage Rd Suite 100	When was the debt incurred?		
	Willowbrook, IL 60527  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	I claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify collection in	notice only	

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Debtor 1 Donald R Hanson, Jr.

Debto	Latrisha K Hanson	Case number (if know)				
4.7	Comcast Nonpriority Creditor's Name	Last 4 digits of account number		\$600.00		
	Box 3002 Southeastern, PA 19398 Number Street City State Zlp Code Who incurred the debt? Check one.	When was the debt incurred?  As of the date you file, the claim				
	☐ Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	■ Debtor 1 and Debtor 2 only	☐ Disputed				
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
		☐ Student loans	a Gain.			
	☐ Check if this claim is for a community debt  Is the claim subject to offset?	_	aration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts			
	☐ Yes	Other. Specify services				
4.8	Creditors Protection S	Last 4 digits of account number	9280	\$281.00		
	Nonpriority Creditor's Name 206 W State St	When was the debt incurred?	Opened 08/15			
	Rockford, IL 61101					
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply			
	Who incurred the debt? Check one.	_				
	Debtor 1 only	Contingent				
	Debtor 2 only	☐ Unliquidated				
	■ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts			
	□Yes	■ Other. Specify Collection Physicians	Attorney Rockford Health			
4.9	David Leum	Last 4 digits of account number		\$0.00		
	Nonpriority Creditor's Name 6260 E. Riverside Blvd	When was the debt incurred?				
	Loves Park, IL 61111  Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply			
	Who incurred the debt? Check one.	· · · · · · · · · · · · · · · · · · ·				
	☐ Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	■ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
		☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharir	ng plans, and other similar debts			
	☐ Yes	■ Other. Specify collection notice only				

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Debtor 1 Donald R Hanson, Jr.

Deb	or 2 Latrisha K Hanson	Case number (if know)			
4.1	Dennis Berber		¢0.00		
0	Nonpriority Creditor's Name	Last 4 digits of account number	\$0.00		
	860 Northpoint Blvd Waukegan, IL 60085	When was the debt incurred?			
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply			
	Who incurred the debt? Check one.				
	☐ Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	■ Debtor 1 and Debtor 2 only	□ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
	■ No	Debts to pension or profit-sharing plans, and other similar debts			
	Yes	Other. Specify collection notice only			
4.1	First National Callestian		<b>*</b> 0.00		
1	First National Collection  Nonpriority Creditor's Name	Last 4 digits of account number	\$0.00		
	Box 51660 Sparks, NV 89435	When was the debt incurred?			
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply			
	Who incurred the debt? Check one.				
	☐ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community	☐ Student loans			
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims			
	No	☐ Debts to pension or profit-sharing plans, and other similar debts			
	☐ Yes	Other. Specify collection notice only			
4.1 2	Harry Darland	Last 4 digits of account number	\$1,200.00		
	Nonpriority Creditor's Name				
	2350 N. Rockton Ave Rockford, IL 61103	When was the debt incurred?			
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply			
	Who incurred the debt? Check one.				
	☐ Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	■ Debtor 1 and Debtor 2 only	□ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
	■ No	Debts to pension or profit-sharing plans, and other similar debts			
	Yes	■ Other. Specify medical			

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Latrisha K Hanson		
Hartsough Dermatology	Last 4 digits of account number	\$25.0
Nonpriority Creditor's Name 7402 E Riverside Blvd Loves Park, IL 61111	When was the debt incurred?	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	$\square$ Obligations arising out of a separation agreement or divorce that you divergent as priority claims	d not
■ No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Medical	
Heights Finance Corp	Last 4 digits of account number 6905	Unknowr
Nonpriority Creditor's Name		
1048 I 70 Dr Sw Ste 102 Columbia, MO 65203	When was the debt incurred?  Opened 05/10 Last Active 5/08/10	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	$\square$ Obligations arising out of a separation agreement or divorce that you diverge that priority claims	d not
■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
□Yes	■ Other. Specify Auto	
Jefferson Capital Syst	Last 4 digits of account number 3003	\$1,482.00
Nonpriority Creditor's Name 16 McIeland Rd Saint Cloud, MN 56303	When was the debt incurred? Opened 04/15	
Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you diverse or divorce that you divorce the young that you divo	d not
■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Factoring Company Account Verizon Wireless	

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2 Latrisha K Hanson		Case number (if know)			
Midland Funding	Last 4 digits of account number	1433	\$368.0		
Nonpriority Creditor's Name 2365 Northside Dr Ste 30	When was the debt incurred?	Opened 10/13	<u> </u>		
San Diego, CA 92108  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply			
Debtor 1 only	Пол				
Debtor 2 only	☐ Contingent				
☐ Debtor 1 and Debtor 2 only	☐ Unliquidated☐ Disputed				
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
Check if this claim is for a community	☐ Student loans				
debt Is the claim subject to offset?	_	aration agreement or divorce that you did not			
■ No	Debts to pension or profit-sharin	ng plans, and other similar debts			
Yes	·	Company Account Webbank			
Mutual Management Serv	Last 4 digits of account number	1540	\$201.0		
Nonpriority Creditor's Name 7177 Crimson Ridge Dr St	When was the debt incurred?	Opened 06/15	·		
Rockford, IL 61107  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply			
■ Debtor 1 only	☐ Contingent				
Debtor 2 only	☐ Unliquidated				
Debtor 1 and Debtor 2 only	☐ Disputed				
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
☐ Check if this claim is for a community	☐ Student loans				
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not			
■ No	Debts to pension or profit-sharing plans, and other similar debts				
☐ Yes	Other. Specify Collection	Attorney Swedish American Mso			
Pinnacle Credit Servic	Last 4 digits of account number	8299	\$222.0		
Nonpriority Creditor's Name  Po Box 640	When was the debt incurred?	Opened 02/14			
Hopkins, MN 55343 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply			
Debtor 1 only	☐ Contingent				
■ Debtor 2 only	☐ Unliquidated				
□ Debtor 1 and Debtor 2 only	Disputed				
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
☐ Check if this claim is for a community	☐ Student loans				
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not			
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts			
Yes	Factoring ( Other. Specify Wireless	Company Account Verizon			

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Debtor Debtor	1 Donald R Hanson, Jr. 2 Latrisha K Hanson		Case number (if know)	
4.1	Portfolio Recovery Ass	Last 4 digits of account number	6566	\$498.00
	Nonpriority Creditor's Name 287 Independence Virginia Beach, VA 23462	When was the debt incurred?	Opened 12/14	
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	■ Other. Specify Nevada N.	Company Account Hsbc Bank A.	
4.2	Radiology Consultants of Rockford	Last 4 digits of account number		\$20.00
	Nonpriority Creditor's Name 39020 Eagle Way Chicago, IL 60678	When was the debt incurred?		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Medical		
4.2	RMH Patholgist	Last 4 digits of account number		\$5.00
	Nonpriority Creditor's Name 6785 Weaver rd Rockford, IL 61114	When was the debt incurred?		
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed	Later	
	At least one of the debtors and another	Type of NONPRIORITY unsecure	g claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharir	og plans, and other similar debts	
	☐ Yes	■ Other. Specify <b>medical</b>	<u> </u>	

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Debtor 1 Donald R Hanson, Jr. Debtor 2 Latrisha K Hanson Case number (if know) 4.2 \$200.00 **Rockford Health Physicians** Last 4 digits of account number 2 Nonpriority Creditor's Name **Dept 4701** When was the debt incurred? Carol Stream, IL 60122 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ■ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Medical 4.2 **Rockford Memorial Hospital** \$236.00 Last 4 digits of account number 3 Nonpriority Creditor's Name **Dept 4628** When was the debt incurred? Carol Stream, IL 60122 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ■ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Medical 4.2 **Rockford Mercantile** 9027 \$1,291.00 Last 4 digits of account number Nonpriority Creditor's Name 2502 S Alpine Rd When was the debt incurred? **Opened 11/14** Rockford, IL 61108 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ■ Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\hfill\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Collection Attorney Harry Darland Md ☐ Yes

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Debtor Debtor	<ul><li>Donald R Hanson, Jr.</li><li>Latrisha K Hanson</li></ul>	Case number (if know)	
4.2	Rockford Radiology	Last 4 digits of account number	\$100.00
	Nonpriority Creditor's Name Box 1790 Brookfield, WI 53008	When was the debt incurred?	
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	Пол	
	Debtor 2 only	☐ Contingent	
	_	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:  ☐ Student loans	
	☐ Check if this claim is for a community debt	_ *****	
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Medical	
4.2			
6	RPM	Last 4 digits of account number	\$0.00
	Nonpriority Creditor's Name 20816 44 Ave W Lynnwood, WA 98036	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	☐ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify collection notice only	
4.2	SRA Associates	Last 4 digits of account number	\$0.00
	Nonpriority Creditor's Name 401 Minnetonka Rd Somerdale, NJ 08083	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	☐ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify collection notice only	

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Debtor 1 Donald R Hanson, Jr. Debtor 2 Latrisha K Hanson Case number (if know) 4.2 \$100.00 Swedish American Hospital Last 4 digits of account number 8 Nonpriority Creditor's Name **Box 1567** When was the debt incurred? Rockford, IL 61110 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ■ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Medical 4.2 total card inc \$0.00 Last 4 digits of account number 9 Nonpriority Creditor's Name 5109 s broadband lane When was the debt incurred? Sioux Falls, SD 57108 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify collection notice only ☐ Yes 4.3 Transworld System Inc/ 7450 \$545.00 Last 4 digits of account number 0 Nonpriority Creditor's Name 2235 Mercury Way Ste 275 When was the debt incurred? **Opened 12/13** Santa Rosa, CA 95407 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ■ Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\hfill\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Collection Attorney Auto Club Group ☐ Yes

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	Donald R Hanson, Jr. Latrisha K Hanson		Case number (if know)	
4.3 1	us bank recovery dept	Last 4 digits of account number		\$500.00
	Nonpriority Creditor's Name Box 5227 CN-OH-W15 Cincinnati, OH 45202	When was the debt incurred?		
	Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other. Specify <b>fees</b>		
4.3	Verizon	Last 4 digits of account number		\$0.00
	Nonpriority Creditor's Name Box 25505	When was the debt incurred?		
	Lehigh Valley, PA 18002  Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.	, , , , , , , , , , , , , , , , , , , ,		
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	No	Debts to pension or profit-sharing		
	Yes	Other. Specify notice only		
4.3 3	Webbank/fingerhut	Last 4 digits of account number	0140	\$0.00
	Nonpriority Creditor's Name		Opened 11/25/12 Last Active	
	6250 Ridgewood Rd Saint Cloud, MN 56303	When was the debt incurred?	Opened 11/25/12 Last Active 2/22/13	
	Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.			
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt	Student loans	and the second of the second o	
	Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	■ Other. Specify Charge Acc		
		- Other opecity		

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2 Latrisha K Hanson	Case number (if know)			
Wfds/wds	Last 4 digits of account number	0692	\$1,875.0	
Nonpriority Creditor's Name	_			
Po Box 1697 Winterville, NC 28590	When was the debt incurred?	Opened 07/12 Last Active 10/31/14		
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply			
Who incurred the debt? Check one.				
☐ Debtor 1 only	☐ Contingent			
☐ Debtor 2 only	☐ Unliquidated			
■ Debtor 1 and Debtor 2 only	☐ Disputed			
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
☐ Check if this claim is for a community	☐ Student loans			
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not		
No	Debts to pension or profit-sharing	ng plans, and other similar debts		
☐ Yes	Other. Specify Automobile	•		

## Part 3: List Others to Be Notified About a Debt That You Already Listed

#### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Т	otal Claim
Total	6a.	Domestic support obligations	6a.	\$	0.00
claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	5,000.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	5,000.00
					otal Claim
Total	6f.	Student loans	6f.	\$	0.00
claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	11,733.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	11,733.00

<sup>5.</sup> Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

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		DOGUITIE	III Paue 33 01 0 1	
Fill in this infor	mation to identify your	case:		
Debtor 1	Donald R Hansor	n, Jr.		
	First Name	Middle Name	Last Name	
Debtor 2	Latrisha K Hanso	on		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS	
Case number _				☐ Check if this is an amended filing

## Official Form 106G

## **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code				State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.2					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.3					
	Name				_
	Number	Street			_
	City		State	ZIP Code	<del>_</del>
2.4	•				
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.5					
	Name				
	Number	Street			_
	City		State	ZIP Code	<del>_</del>

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Fill in this	information to identify you	r case:			
Debtor 1	Donald R Hanso	on, Jr.			
Dalatano	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filin	Latrisha K Hans First Name	Middle Name	Last Name		
United Stat	tes Bankruptcy Court for the:	NORTHERN DISTRIC	Γ OF ILLINOIS		
Case numb	per				
(if known)				☐ Check if this is amended filing	
Official	Form 106H				
	ule H: Your Cod	debtors			12/15
<u> </u>	die II. Tour ook	acotor 3			12/13
_ `	you have any codebtors? (I	f you are filing a joint case,	do not list either spouse	as a codebtor.	
■ No □ Yes					
	nin the last 8 years, have yo a, California, Idaho, Louisian			<b>y?</b> (Community property states and territories incington, and Wisconsin.)	lude
<b>-</b>				,	
	Go to line 3.  Did your spouse, former spouse,	ouse or legal equivalent liv	e with you at the time?		
<b>—</b> 103	. Dia your spouse, former spo	ouse, or legal equivalent in	c with you at the time:		
in line Form 1	2 again as a codebtor only	if that person is a guara	ntor or cosigner. Make s	if your spouse is filing with you. List the pers sure you have listed the creditor on Schedule 6G). Use Schedule D, Schedule E/F, or Sched	D (Official
	Column 1: Your codebtor Name, Number, Street, City, State and	ZIP Code		Column 2: The creditor to whom you owe Check all schedules that apply:	the debt
0.4				Пол. 11 В ї	
3.1	Name			_ □ Schedule D, line □ Schedule E/F, line	
				☐ Schedule G, line	
1	Number Street			_	
	City	State	ZIP Code		
3.2				☐ Schedule D, line	
	Name			☐ Schedule E/F, line	
				☐ Schedule G, line	
	Number Street			_	
(	City	State	ZIP Code		

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						_								
Fill	in this information to identify your	case:												
Del	otor 1 Donald R F	Donald R Hanson, Jr.												
	Debtor 2 Spouse, if filing) Latrisha K Hanson													
Uni	ted States Bankruptcy Court for th	e: NORTHERN DISTRI	CT OF ILLINOIS											
Case number (If known)					Check if this is:  An amended filing A supplement showing postpetition chapt 13 income as of the following date:									
	fficial Form 106l					M	M / DD/ Y	YYY						
S	chedule I: Your Ind	come								12/15				
spo atta Par	plying correct information. If you use. If you are separated and yo ch a separate sheet to this form  The describe Employment	our spouse is not filing w . On the top of any additi	ith you, do not inclu	de infor	mati	on about	your spo	ouse. If mo	ore space is	needed,				
1.	information.	Fill in your employment information.			Debtor 1					Debtor 2 or non-filing spouse				
	If you have more than one job, attach a separate page with information about additional	Employment status	Employment status			☐ Employed								
		,	☐ Not employed				■ Not employed							
	employers.	Occupation	assembly line	unemployed										
	Include part-time, seasonal, or self-employed work.	Employer's name	Chrysler											
	Occupation may include student or homemaker, if it applies.	Employer's address												
		How long employed t	here? 4 years	<b>i</b>			_							
Pai	Give Details About Mo	onthly Income												
	mate monthly income as of the use unless you are separated.	date you file this form. If	you have nothing to r	eport for	any	line, write	\$0 in the	space. Inc	clude your n	on-filing				
	ou or your non-filing spouse have n e space, attach a separate sheet t		ombine the informatio	n for all	empl	oyers for t	that perso	on on the li	nes below. I	i you need				
						For Deb	otor 1		btor 2 or ng spouse					
2.	List monthly gross wages, sal deductions). If not paid monthly			2.	\$	2,	414.00	\$	0.00	<u>)</u>				
3.	Estimate and list monthly over	rtime pay.		3.	+\$		0.00	+\$	0.00	<u>)                                    </u>				

2,414.00

0.00

4. Calculate gross Income. Add line 2 + line 3.

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Deb Deb	tor 1 tor 2	Donald R Hanson, Jr. Latrisha K Hanson	_	(	Case	number (if kno	wn)				
					For	Debtor 1			Debtor:		
	Cop	by line 4 here	4.		\$	2,414.	00	\$		0.00	_
5.	List	all payroll deductions:									
	5a.	Tax, Medicare, and Social Security deductions	5a	à.	\$	270.	00	\$		0.00	
	5b.	Mandatory contributions for retirement plans	5b	).	\$		00	\$		0.00	
	5c.	Voluntary contributions for retirement plans	50	<b>)</b> .	\$	0.	00	\$_		0.00	_
	5d.	Required repayments of retirement fund loans	5d	d.	\$	0.	00	\$		0.00	_
	5e.	Insurance	5e	€.	\$	0.	00	\$		0.00	
	5f.	Domestic support obligations	5f.		\$_		00	\$_		0.00	_
	5g.	Union dues	5g		\$_	50.		\$_		0.00	
	5h.	Other deductions. Specify:	5n	1.+	\$_			+ \$_		0.00	_
6.	Add	I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$_	320.	00	\$_		0.00	_
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$_	2,094.	00	\$_		0.00	_
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total			•			•			
	O.L.	monthly net income.	8a		\$_		00	\$_		0.00	_
	8b. 8c.	Interest and dividends Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce			\$_		00	\$_		0.00	_
	0.4	settlement, and property settlement.	80		\$_		00	\$_		0.00	_
	8d. 8e.	Unemployment compensation Social Security	8d 8e		\$_ \$		00 00	\$_ \$		0.00	_
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:	e 8f.		\$_	0.	00	\$_		0.00	_
	8g. 8h.	Pension or retirement income Other monthly income. Specify: part time pastor	8g	]. 1.+	\$_ \$		00	* + \$		0.00	_
	OII.	part time pastor		I.T =	Ψ_	1,400.	00	ΤΨ_		0.00	_
9.	Add	l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	;	\$	1,400.	00	\$		0.0	0
10.	Cal	culate monthly income. Add line 7 + line 9.	10.	\$		3,494.00	<b>.</b> s		0.00	= \$	3,494.00
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		Ť –		0,404.00	*		- 0.00	-	0,404.00
11.	Incli othe Do i	te all other regular contributions to the expenses that you list in <i>Schedule</i> ude contributions from an unmarried partner, members of your household, your friends or relatives.  not include any amounts already included in lines 2-10 or amounts that are not cify:	r depe			•		•	Schedule 11.		0.00
12.		If the amount in the last column of line 10 to the amount in line 11. The reset that amount on the Summary of Schedules and Statistical Summary of Certailies							12.	\$	3,494.00
13.	Do :	you expect an increase or decrease within the year after you file this form No.	1?							Combi month	ned ly income
	П	Yes, Explain:									

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						_		
Fill	in this informa	tion to identify yo	our case:					
Deb	otor 1	Donald R Ha	anson, Jr	-		Ch	eck if this is:	
	Debtor 2 (Spouse, if filing)  Latrisha K Hanson			<ul> <li>☐ An amended filing</li> <li>☐ A supplement showing postpetition chap</li> <li>13 expenses as of the following date:</li> </ul>				
` .							<u>'</u>	
Unit	ted States Bankı	ruptcy Court for the	: NORTH	HERN DISTRICT OF ILLIN	OIS		MM / DD / YYYY	
	se number nown)							
Of	fficial Fo	rm 106J						
S	chedule	J: Your	<b>Exper</b>	ises				12/15
info	ormation. If m		eded, atta	. If two married people ar ich another sheet to this n.				
Par		ribe Your House	ehold					
1.	Is this a joir							
	□ No. Go to		in a conar	ate household?				
	_		iii a Sepai	ate nousenoid?				
	■ N □ Y	-	st file Offici	al Form 106J-2, <i>Expense</i> s	for Separate House	ehold of De	ebtor 2.	
2.	Do you have	e dependents?	■ No					
	Do not list D Debtor 2.	•	☐ Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Do not state	the						□ No
	dependents	names.						☐ Yes
								□ No
								□ Yes □ No
								☐ Yes
								□ No
								☐ Yes
3.	expenses o	oenses include f people other t d your depende	than 👝	No Yes				
Est exp	imate your ex		our bankr	ly Expenses uptcy filing date unless y y is filed. If this is a supp				
the		h assistance an		government assistance in cluded it on <i>Schedule I:</i> Y			Your exp	enses
4.		or home owners and any rent for th		nses for your residence. In or lot.	nclude first mortgag	e 4.	\$	1,000.00
	If not includ	led in line 4:						
	4a. Real e	estate taxes				4a.	\$	0.00
		rty, homeowner's	s, or renter	's insurance		4b.	·	0.00
			•	upkeep expenses		4c.	\$	0.00
_		owner's associa				4d. 5.	·	0.00
ລ.	AUGITIONALI	norroage paym	ents for va	<b>our residence</b> , such as ho	THE ECHITY IDANS	5	σ.	0.00

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	Donald R Hanson, Jr.			
Debtor 2 <u>I</u>	Latrisha K Hanson	Case numl	per (if known)	
6. Utilitie	s:			
	Electricity, heat, natural gas	6a.	\$	300.00
	Nater, sewer, garbage collection	6b.	\$	100.00
	Felephone, cell phone, Internet, satellite, and cable services	6c.	\$	300.00
6d. (	Other. Specify:	6d.	\$	0.00
Food a	and housekeeping supplies		\$	500.00
Childo	are and children's education costs	8.	\$	0.00
Clothir	ng, laundry, and dry cleaning	9.	\$	100.00
). Persor	nal care products and services	10.	\$	100.00
. Medica	al and dental expenses	11.	\$	100.00
	portation. Include gas, maintenance, bus or train fare.	10	Φ.	300.00
	include car payments.	12.	\$	
	ainment, clubs, recreation, newspapers, magazines, and books	13.	\$	100.00
	able contributions and religious donations	14.	\$	125.00
5. Insura	include insurance deducted from your pay or included in lines 4 or 20.			
	Life insurance	15a.	\$	0.00
	Health insurance	15b.	· -	0.00
15c. \	/ehicle insurance	15c.	\$	119.00
	Other insurance. Specify:	15d.	\$	0.00
	Do not include taxes deducted from your pay or included in lines 4 or 20.		·	
Specify		16.	\$	0.00
	ment or lease payments:		_	
	Car payments for Vehicle 1	17a.		0.00
	Car payments for Vehicle 2	17b.	·	0.00
	Other. Specify:	17c.	\$	0.00
	Other. Specify:	17d.	\$	0.00
	ayments of alimony, maintenance, and support that you did not report a		\$	0.00
	ted from your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I) payments you make to support others who do not live with you.	).	\$	0.00
Specify		19.	Ψ	0.00
, ,	real property expenses not included in lines 4 or 5 of this form or on Sci		ur Income.	
	Mortgages on other property	20a.		0.00
	Real estate taxes	20b.	\$	0.00
20c. F	Property, homeowner's, or renter's insurance	20c.	\$	0.00
20d. N	Maintenance, repair, and upkeep expenses	20d.	\$	0.00
20e. H	Homeowner's association or condominium dues	20e.	\$	0.00
l. Other:	Specify:	21.	+\$	0.00
) Calcul	ate your monthly expenses			
	dd lines 4 through 21.		\$	3,144.00
	opy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	3,177.00
	dd line 22a and 22b. The result is your monthly expenses.	•	\$	3,144.00
220. AC	au iilie 22a anu 22b. The result is your monthly expenses.		Ψ	3,144.00
	ate your monthly net income.			
	Copy line 12 (your combined monthly income) from Schedule I.	23a.		3,494.00
23b. (	Copy your monthly expenses from line 22c above.	23b.	-\$	3,144.00
23c 9	Subtract your monthly expenses from your monthly income.			
	The result is your <i>monthly net income</i> .	23c.	\$	350.00
4 <b>Da</b>	. avenat on increase or decrease in various summarian with in the corresponding	- الماد الماد الماد	forms	
	I expect an increase or decrease in your expenses within the year after mple, do you expect to finish paying for your car loan within the year or do you expect your car loan within the year or do you expect you			or decrease because o
	tion to the terms of your mortgage?		,	300.0000 0000000 0
■ No.				
☐ Yes	. Explain here:			

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Fill in this infor	rmation to identify your	C350:		
Debtor 1	Donald R Hanso First Name	·	Name	
Dobtor 2			Name	
Debtor 2 (Spouse if, filing)	Latrisha K Hanse		Name	
(Spouse II, IIIIIIg)	i iist ivaille	Middle Name Last	Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT OF ILLINOIS	S	
Case number				
(if known)				☐ Check if this is an
				amended filing
ou must file the	is form whenever you	er, both are equally responsible for su file bankruptcy schedules or amended in connection with a bankruptcy case 1519, and 3571.	d schedules. Making a false state	
Sig	ın Below			
Did you pa	ay or agree to pay som	eone who is NOT an attorney to help	ou fill out bankruptcy forms?	
■ No				
□ Yes.	Name of person		Attach Bank	ruptcy Petition Preparer's Notice,
				and Signature (Official Form 119)
	alty of perjury, I declare	that I have read the summary and sc	hedules filed with this declaratio	n and
X /s/ Doi	nald R Hanson, Jr.	x	/s/ Latrisha K Hanson	
	d R Hanson, Jr.		Latrisha K Hanson	
	ure of Debtor 1		Signature of Debtor 2	
- 3			-	
Date	August 24, 2016		Date _August 24, 2016	
_				

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	l in this infor	mation to identify your	case:				
De	btor 1	Donald R Hanso	n, Jr.  Middle Name		Last Name		
De	btor 2	Latrisha K Hanse			Last Name		
	ouse if, filing)	First Name	Middle Name		Last Name		
Un	ited States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLIN	NOIS		
Ca	se number						
	nown)						neck if this is an nended filing
_							
	fficial Fo						
St	atement	t of Financial A	Affairs for Indiv	iduals	s Filing for B	ankruptcy	4/16
						equally responsible for suppy y additional pages, write you	
		nore space is needed, n). Answer every ques		o tilis ioi	in. On the top of any	y additional pages, write you	name and case
Da	rt 1: Give	Details About Your Ma	rital Status and Where Yo	ou Lived	Refore		
				ou Liveu	Belore		
1.	What is you	ır current marital statu	s?				
	■ Married Not ma						
2.	During the	last 3 years, have you	lived anywhere other tha	n where	vou live now?		
	During and	iaot o youro, navo you	arou any mioro omor ma		, , , , , , , , , , , , , , , , , , , ,		
	■ No						
	☐ Yes. Li	st all of the places you li	ved in the last 3 years. Do	not includ	de where you live now	I.	
	Debtor 1 P	rior Address:	Dates Debtor lived there	1	Debtor 2 Prior Ad	ldress:	Dates Debtor 2 lived there
<b>3.</b> stat						ity property state or territory ico, Texas, Washington and Wi	
	■ No						
	_	ake sure you fill out Sch	edule H: Your Codebtors (	Official Fo	orm 106H).		
		<b>,</b>			,		
Pa	rt 2 Expla	in the Sources of You	Income				
4.	Fill in the tot	al amount of income you	aployment or from operatous received from all jobs and have income that you rece	d all busin	esses, including part-		dar years?
	□ No						
	_	Il in the details.					
		u.o uotailo.					
			Debtor 1			Debtor 2	
			Sources of income Check all that apply.	(befo	ss income ore deductions and usions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until ed for bankruptcy:	■ Wages, commissions, bonuses, tips		\$17,500.00	☐ Wages, commissions, bonuses, tips	\$0.00
			☐ Operating a business			☐ Operating a business	

Official Form 107

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Donald R Hanson, Jr. Debtor 1 Latrisha K Hanson Debtor 2 Case number (if known) Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Check all that apply. (before deductions and Check all that apply. (before deductions exclusions) and exclusions) For last calendar year: \$62,000.00 \$0.00 ☐ Wages, commissions, Wages, commissions, (January 1 to December 31, 2015) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business For the calendar year before that: \$98,000.00 \$0.00 ☐ Wages, commissions, Wages, commissions. (January 1 to December 31, 2014) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. No Yes. Fill in the details. Debtor 2 Debtor 1 Sources of income Gross income from Sources of income **Gross income** Describe below. each source Describe below. (before deductions (before deductions and and exclusions) exclusions) Part 3: List Certain Payments You Made Before You Filed for Bankruptcy Are either Debtor 1's or Debtor 2's debts primarily consumer debts? Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425\* or more? □ No. Go to line 7. ☐ Yes List below each creditor to whom you paid a total of \$6,425\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. \* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. ☐ Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an

**Total amount** 

paid

Amount you

still owe

Creditor's Name and Address

attorney for this bankruptcy case.

Dates of payment

Was this payment for ...

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				,		
<i>In</i> of a	lithin 1 year before you filed for bankrupt isiders include your relatives; any general pair which you are an officer, director, person in business you operate as a sole proprietor. 1 imony.	artners; relatives of any gen a control, or owner of 20% o	eral partners; partner or more of their voting	rships of which yo securities; and a	ou are a general p ny managing age	partner; corporations int, including one for
	No Yes. List all payments to an insider.					
l	nsider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for th	is payment
in	fithin 1 year before you filed for bankrupt isider? Include payments on debts guaranteed or cost		ments or transfer a	ny property on a	ccount of a deb	t that benefited an
	No					
	- · · · · · · · · · · · · · · · · · · ·					
l.	nsider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for th Include credito	
Part 4	Identify Legal Actions, Repossession	ns, and Foreclosures				
	modifications, and contract disputes.  □ No ■ Yes. Fill in the details.  Case title  Nature of ti		Court or agency		Status of the	case
	Case number	foreclosure	Winnehage Co		□ Dandina	
\ [	Well Fargo /s Donald Hanson Jr I3CH1681	Torectosure	Winnebago Co		☐ Pending ☐ On appeal ☐ Concluded	
	/ithin 1 year before you filed for bankrupt heck all that apply and fill in the details below  No. Go to line 11.  Yes. Fill in the information below.		erty repossessed, f	oreclosed, garnis	shed, attached, s	seized, or levied?
C	Creditor Name and Address	Describe the Property  Explain what happened	d	Date		Value of the property
	_		luding a bank or fir	ancial institution	n, set off any am	ounts from your
	Creditor Name and Address	Describe the action the	creditor took	Date taker	action was	Amount
	/ithin 1 year before you filed for bankrupt ourt-appointed receiver, a custodian, or a		erty in the possessi	on of an assigne	e for the benefit	of creditors, a
	No Yes					

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	otor 1 otor 2	Donald R Hanson, Jr. Latrisha K Hanson	- Doddinent 1	Case number	(if known)	
Pai	rt 5:	List Certain Gifts and Contributions				
13.	<b>=</b> 1	in <b>2 years before you filed for bankrupt</b> on No Yes. Fill in the details for each gift.	cy, did you give any gifts v	with a total value of more th	nan \$600 per person	?
	Gifts per p	s with a total value of more than \$600 person son to Whom You Gave the Gift and ress:	Describe the gifts		Dates you gave the gifts	Value
14.		in <b>2 years before you filed for bankrupt</b> on  No  Yes. Fill in the details for each gift or contr		or contributions with a tota	I value of more than	\$600 to any charity?
	Gifts more Chai	s or contributions to charities that total e than \$600 rity's Name ress (Number, Street, City, State and ZIP Code)		ontributed	Dates you contributed	Value
Pai	rt 6:	List Certain Losses				
15.	or ga	n 1 year before you filed for bankruptcymbling?  No  Yes. Fill in the details.	•	, ,,		
		the loss occurred Inc	scribe any insurance cover lude the amount that insura urance claims on line 33 of	nce has paid. List pending	Date of your loss	Value of property lost
Pai	rt 7:	List Certain Payments or Transfers				
16.	Includ	in 1 year before you filed for bankruptcy ulted about seeking bankruptcy or prepile any attorneys, bankruptcy petition prepile.  No Yes. Fill in the details.	paring a bankruptcy petition	on?		rty to anyone you
	Add Ema	on Who Was Paid ress ill or website address on Who Made the Payment, if Not You	Description and value transferred	ue of any property	Date payment or transfer was made	Amount of payment
	Eric 395 Suit Roc	Pratt Law Firm P.C. 7 North Mulford Rd.	Attorney Fees			\$0.00
17.	prom Do no	in 1 year before you filed for bankruptcy ised to help you deal with your creditor of include any payment or transfer that you	rs or to make payments to		r transfer any prope	rty to anyone who
	_	No Yes. Fill in the details.				
		son Who Was Paid	Description and value transferred	ue of any property	Date payment or transfer was made	Amount of payment

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Donald R Hanson, Jr. Debtor 2 Latrisha K Hanson

Case number (if known)

18.	Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?  Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.  No  Yes. Fill in the details.					
	Person Who Received Transfer Address  Person's relationship to you	Description and v property transfer		payme	ibe any property or ents received or debts n exchange	Date transfer was made
<ul> <li>Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of w beneficiary? (These are often called asset-protection devices.)</li> <li>No</li> <li>Yes. Fill in the details.</li> </ul>				of which you are a		
	Name of trust	Description and v	alue of the prop	perty trans	ferred	Date Transfer was made
Pai	rt 8: List of Certain Financial Accounts, Ins	truments, Safe Deposit	t Boxes, and Sto	orage Unit	s	
<ul> <li>Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, c sold, moved, or transferred?</li> <li>Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brol houses, pension funds, cooperatives, associations, and other financial institutions.</li> <li>No</li> <li>Yes. Fill in the details.</li> </ul>				, ,		
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of accounts instrument	int or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 y cash, or other valuables?	rear before you filed for	bankruptcy, an	ıy safe dep	osit box or other depos	itory for securities,
	■ No □ Yes. Fill in the details.					
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had access to it? Do Address (Number, Street, City, State and ZIP Code)		Describe the contents		Do you still have it?
22.	Have you stored property in a storage unit o	r place other than your	home within 1	year befor	e you filed for bankrupto	cy?
	■ No □ Yes. Fill in the details.					
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	to it?	to it? Address (Number, Street, City,		the contents	Do you still have it?
Pa	rt 9: Identify Property You Hold or Control f	for Someone Else				
23.	Do you hold or control any property that son for someone.	meone else owns? Inclu	ude any propert	y you borr	owed from, are storing f	or, or hold in trust
	■ No □ Yes. Fill in the details.					
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		Describe	the property	Value
Pa	rt 10: Give Details About Environmental Info	rmation				
For	the nurnose of Part 10, the following definition	ns anniv				

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or Statement of Financial Affairs for Individuals Filing for Bankruptcy

Official Form 107

page 5

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Donald R Hanson, Jr. Debtor 2 Latrisha K Hanson

Case number (if known)

toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.					atutes or	
	Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.					
		<i>rdous material</i> means anything an envi rdous material, pollutant, contaminant,		waste	e, hazardous substance, toxic s	substance,
₹ер	ort all	notices, releases, and proceedings that	at you know about, regardless of when	they o	occurred.	
24.	Has a	any governmental unit notified you that	you may be liable or potentially liable	under	or in violation of an environme	ental law?
		No				
		Yes. Fill in the details.				
		ne of site ress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)		nvironmental law, if you now it	Date of notice
25.	Have	you notified any governmental unit of	any release of hazardous material?			
		No				
		Yes. Fill in the details.	Covernmental unit	-	undurantal land if you	Data of nation
		ne of site ress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)		nvironmental law, if you now it	Date of notice
26.	Have	you been a party in any judicial or adn	ninistrative proceeding under any envi	ronme	ntal law? Include settlements	and orders.
		No				
	_	Yes. Fill in the details.				
		e Title e Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Natur	e of the case	Status of the case
Par	t 11:	Give Details About Your Business or	Connections to Any Business			
7	Withi	in 4 years before you filed for bankrupt	cy did you own a business or baye an	v of th	e following connections to an	, husiness?
٠,.		☐ A sole proprietor or self-employed in	• •	-	-	/ Dusiness :
		☐ A member of a limited liability comp			•	
		☐ A partner in a partnership	any (220) or minica hability partiters in	ıb (LL:	,	
		☐ An officer, director, or managing ex	ecutive of a cornoration			
		☐ An owner of at least 5% of the voting	•			
	_	No. None of the above applies. Go to F				
		No. None of the above applies. Go to F				
		res. Check all that apply above and fill iness Name	Describe the nature of the business		Employer Identification numbe	•
	Add	ress ber, Street, City, State and ZIP Code)	Name of accountant or bookkeeper		Do not include Social Security number or ITIN.  Dates business existed	
28.		in 2 years before you filed for bankrupt utions, creditors, or other parties.	cy, did you give a financial statement t			ude all financial
	_	No Yes. Fill in the details below.				
	Nam		Date Issued			
		ress ber, Street, City, State and ZIP Code)				

Part 12: Sign Below

Case 16-82019 Doc 1 Filed 08/24/16 Entered 08/24/16 13:41:36 Desc Main Document Page 46 of 61 Donald R Hanson, Jr. Debtor 1 Debtor 2 Latrisha K Hanson Case number (if known) are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Donald R Hanson, Jr. /s/ Latrisha K Hanson Latrisha K Hanson Donald R Hanson, Jr. Signature of Debtor 2

Signature of Debtor 1

Date August 24, 2016

Date August 24, 2016

Date August 24, 2016

Date August 24, 2016

Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?

No

Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

No

Yes. Name of Person

Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

### Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure</a>.

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

### Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit">http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit</a> AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

### UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

### RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

### (Court-Approved Retention Agreement, Revised as of 4/20/2015)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

#### A. BEFORE THE CASE IS FILED

#### THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

#### THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule, and explain how and when the attorney's fees and the trustee's fees are determined and paid.
- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.

- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.
- 6. Advise the debtor of the need to maintain appropriate insurance.

### B. AFTER THE CASE IS FILED

### THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and when the case is called for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

#### THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.
- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other

attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.

- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Provide any other legal services necessary for the administration of the case.

### C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3. If the case is converted to a case under chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the chapter 7 case for any unpaid fees and expenses, pursuant to section

726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

### D. RETAINERS AND PREVIOUS PAYMENTS

1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.

□The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:

- (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:
- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;
- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing.

### E. CONDUCT AND DISCHARGE

- 1. *Improper conduct by the attorney*. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. *Improper conduct by the debtor*. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

### F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00
- 2. In addition, the debtor will pay the filing fee required in the case of \$310.00
- 3. Before signing this agreement, the attorney has received, \$0.00

toward the flat fee, leaving a balance due of \$4,000.00; and \$0.00 for expenses,

leaving a balance due for the filing fee of \$0.00

4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

Date: August 24, 2016	
Signed:	
/s/ Donald R Hanson, Jr.	/s/ Philip H. Hart
Donald R Hanson, Jr.	Philip H. Hart
	Attorney for the Debtor(s)
/s/ Latrisha K Hanson	•
Latrisha K Hanson	
Debtor(s)	
Do not sign this agreement if the amo	unts are blank.
	Local Bankruptcy Form 23c

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B2030 (Form 2030) (12/15)

### **United States Bankruptcy Court**Northern District of Illinois

In	Donald R Hanson, Jr. re Latrisha K Hanson		Case No.			
	Latiisiia K Haiisoii	Debtor(s)	Chapter	13		
	DIGGLOGUPE OF COMPE		NEV FOR DI	EDTOD (C)		
	DISCLOSURE OF COMPEN	NSATION OF ATTOR	KNEY FOR DE	EBIOR(S)		
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:					
	For legal services, I have agreed to accept			4,000.00		
	Prior to the filing of this statement I have received			0.00		
	Balance Due		\$	4,000.00		
2.	The source of the compensation paid to me was:					
	■ Debtor □ Other (specify):					
3.	The source of compensation to be paid to me is:					
	■ Debtor □ Other (specify):					
4.	■ I have not agreed to share the above-disclosed comp	ensation with any other person to	unless they are mem	bers and associates of my law firm.		
	☐ I have agreed to share the above-disclosed compensations copy of the agreement, together with a list of the narrows.					
5.	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:					
	<ul> <li>a. Analysis of the debtor's financial situation, and rende</li> <li>b. Preparation and filing of any petition, schedules, state</li> <li>c. Representation of the debtor at the meeting of credite</li> <li>d. [Other provisions as needed]</li> <li>Negotiations with secured creditors to reaffirmation agreements and application</li> </ul>	ement of affairs and plan which ors and confirmation hearing, an educe to market value; exe ns as needed; preparation	may be required; d any adjourned hea	rings thereof;		
б.	522(f)(2)(A) for avoidance of liens on how By agreement with the debtor(s), the above-disclosed fee Representation of the debtors in any dis- any other adversary proceeding.	e does not include the following	service: cial lien avoidanc	es, relief from stay actions or		
		CERTIFICATION				
this	I certify that the foregoing is a complete statement of any shankruptcy proceeding.	y agreement or arrangement for	payment to me for r	epresentation of the debtor(s) in		
	August 24, 2016	/s/ Philip H. Hart				
_	Date	Philip H. Hart Signature of Attorne Eric Pratt Law Fir 3957 North Mulfor Suite C Rockford, IL 6111 815-315-0683 Fa	m P.C. rd Rd. 4			
		rockford@jordanj				
		Name of law firm				

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### **United States Bankruptcy Court** Northern District of Illinois

In re	Donaid R Hanson, Jr. Latrisha K Hanson		Case No.		
	Editional K Hanson	Debtor(s)	Chapter	13	
	VF	ERIFICATION OF CREDITOR N	MATRIX		
		Number of	f Creditors:	37	
	The above-named Debtor(s) hereby verifies that the list of creditors is true and correct to the best of m (our) knowledge.				
Date:	August 24, 2016	/s/ Donald R Hanson, Jr.  Donald R Hanson, Jr.  Signature of Debtor			
Date:	August 24, 2016	/s/ Latrisha K Hanson Latrisha K Hanson			

Afni, Inc. Po Box 3097 Bloomington, IL 61702

Ally Financial 200 Renaissance Ctr Detroit, MI 48243

Americollect Box 1566 Manitowoc, WI 54221

Ashro 3650 Milwaukee St Madison, WI 53714

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Comcast Box 3002 Southeastern, PA 19398

Creditors Protection S 206 W State St Rockford, IL 61101

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Midland Funding 2365 Northside Dr Ste 30 San Diego, CA 92108

Mutual Management Serv 7177 Crimson Ridge Dr St Rockford, IL 61107

Pinnacle Credit Servic Po Box 640 Hopkins, MN 55343

Portfolio Recovery Ass 287 Independence Virginia Beach, VA 23462

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Rockford Memorial Hospital Dept 4628 Carol Stream, IL 60122

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Transworld System Inc/ 2235 Mercury Way Ste 275 Santa Rosa, CA 95407

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